# NORTHERN NEVADA ADULT MENTAL HEALTH SERVICES POLICY AND PROCEDURE DIRECTIVE

SUBJECT: CONSUMER SAFETY PLAN

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ORIGINAL DATE: 2/18/10

REVIEW/REVISE DATE:

APPROVAL: Rosalyne Reynolds {s}, Agency Director

### I. PURPOSE

The purpose of this policy is to establish a plan for consumer safety designed to promote patient safety throughout all Northern Nevada Adult Mental Health (NNAMHS) departments, programs, sites, and services. The plan shall focus on system-wide, integrated performance improvement activities, whenever possible to assure an integrated approach to consumer safety.

### II. POLICY

It is the policy to develop and maintain a Consumer Safety Plan and Program. A culture of safety is central to the identification and correction of issues related to consumer safety. NNAMHS promotes this culture by encouraging open discussion regarding safety issues in order to reduce risk to consumers.

### III. REFERENCES

Nevada Revised Statutes (NRS) 439.865-890)

MHDS Policy 4.009 Consumer Safety and Security

MHDS Policy 4.054 Sentinel Events

MHDS Policy 4.056 Communicable Infectious Disease Policy

NNAMHS Policy NN-PI-03 Sentinel Events

NNAMHS Policy NN-EC-01 Disaster Plan

NNAMHS Policy NN-EC-07 Interim Life Safety Measures

NNAMHS Policy NN-EC-13 Hazardous Materials and Waste Management

**Procedures** 

NNAMHS Policy NN-IC-03 Infection Control Committee

NNAMHS Policy NN-IC-07 Standard Precautions

NNAMHS Policy NN-IC-08 Tuberculosis Exposure Plan

### IV. PROCEDURES

1. Nevada Revised Statute (NRS 439.865-890) requires all medical facilities to develop, adopt, implement and monitor consumer safety activities to improve the health and safety of consumers who are treated at NNAMHS.

# 2. GOALS OF CONSUMER SAFETY PROGRAM

- A. To promote a culture of safety within NNAMHS which defines safety as it's first priority.
- B. To be proactive in recognizing and correcting potential system failures within the organization.
- C. To assure compliance with the National Patient Safety Goals as set forth by the Joint Commission through on-going monitoring of processes, analyzing trends, and developing corrective actions to improve consumer safety.

## 3. SCOPE OF THE CONSUMER SAFETY PROGRAM

- A. The Consumer Safety Program addresses areas related to all areas of consumer safety, but specifically focuses on: Infection Control, Sentinel Events, Medication Management programs and Safety Education for consumers and staff.
- B. All service areas at NNAMHS will participate in the goals of the Consumer Safety Plan. This includes services located on the

- grounds (hospital, and outpatient services) as well as those programs located at the Linden Street Mental Health Center.
- C. All services will monitor compliance with consumer safety standards as well as report concerns to be addressed by the Consumer Safety Committee.
- D. The Environment of Care plan and committee primarily will address issues related to the physical plan and environment.

# 4. STRUCTURE AND RESPONSIBILITY OF CONSUMER SAFETY COMMITTEE

- A. The Patient Safety Plan is implemented and monitored by the designated Patient Safety Officer (Sandi Kohtz, Performance Improvement Coordinator 688-2018). The Patient Safety Officer is appointed by the Agency Director.
- B. The role of the Consumer Safety Officer is to:
  - 1. Oversee the Consumer Safety Plan implementation
  - 2. Manage the Incident Reporting system, including reporting of sentinel events.
  - 3. Participate in events analysis and tracking to assure compliance with our plans of correction.
  - 4. Participation in the education activities with staff to increase compliance with the National Consumer Safety Goals and internal plans of correction.
  - Take action as deemed necessary and in collaboration with the Division of MHDS administration to ensure Consumer Safety at NNAMHS and report any action taken to the Consumer Safety Committee.
  - 6. Serve on the Consumer Safety Committee.

- C. The Consumer Safety Committee is an interdisciplinary team which includes: Facilities Supervisor, Disaster and Education Coordinators, Nursing Department, Outpatient Services, Food Services, Infection Control Officer and Medical Staff.
  - The committee meets one time monthly in conjunction with the Core leadership committee meeting.
  - 2. Reports are given, trends monitored, and plans to address issues are developed as part of this team.
  - Completion of any corrective action plans are monitored by the Consumer Safety Officer.

## 5. MECHANISMS FOR COORDINATION OF SAFETY ACTIVITIES

- A. The Patient Safety Plan is coordinated among programs and across professional disciplines by the Consumer Safety Officer.
- Various methods of coordination shall be used including meetings,
   staff and consumer education, and written and verbal communication.
- C. Outcomes and trends identified will be communicated through meeting minutes as well as verbally with specific departments as required.

### 6. COMMUNICATING WITH CONSUMERS ABOUT SAFETY

- A. The primary responsibility for communication of safety education to consumers falls to nursing and pharmacy departments and social services as well as outpatient service coordinators and department managers.
- B. The emphasis of education within departments is to focus on prevention of illness, issues related to appropriate medication use, and prevention of suicide and violence.

## 7. STAFF EDUCATION

- A. Staff is educated regarding consumer safety through these four processes:
  - Orientation Education: All new staff including full-time, parttime, contract staff and volunteers receive safety training as part of their orientation. This training addresses overall agency safety procedures as well as department specific issues.
  - Department specific safety education: This is completed prior to assuming duties within their department. The Consumer Safety Officer works with Department Heads to identify those areas requiring training and assure that department specific orientation to safety is implemented.
  - 3. Annual refresher training: All employees receive an annual review of all safety policies and procedures within the organization.
  - 4. Special training: Whenever a new trend occurs or safety related policy implemented, special training will occur.

# 8. REPORTING AT CONSUMER SAFETY COMMITTEE

- A. At each consumer safety meeting the following reports will be given:
  - 1. Sentinel event review. (Consumer Safety Officer)
  - 2. Infection Control. (Infection Control Officer)
  - 3. Pharmacy/Medication (Pharmacy Manager)
  - 4. Safety Education (Education Coordinator)
- B. In addition, each meeting will include a discussion of any issues which have arisen either through observation in the departments or through incident reporting.

## 9. SAFETY IMPROVEMENT ACTIVITIES

- A. Safety Improvement activities are prioritized through the Consumer Safety Committee.
- B. At a minimum, activities directly related to National Patient Safety

  Goals and those identified through analysis of the trends determined through data collection will be included as top priorities for the agency.
- C. The agency, through the Consumer Safety Committee will review priorities at least annually and adjust these as needed.
- D. The following routine safety-related areas will be monitored through data collection and analysis:
  - 1. Incident reporting
  - 2. Medication error Reporting
  - 3. Infection Control and prevention
  - Facility Safety (monitored through Environment of Care committee)
  - Obtain, analyze and implement, if appropriate, suggestions for improving patient safety from patients, staff, and families.
  - 6. Identify, report, and manage critical incidents and sentinel events.
  - 7. Provide proactive risk reduction through identification of high risk process and analysis of data.
  - Reports of results of data to the Consumer Safety Committee, organization staff, executive leadership and the governing body.